A PUBLIC DOCUMENT

STATEMENT OF ECONOMIC INTERESTS

Date Initial Filing Received

COVER PAGE

Please type or print in ink.		2018 MAR -	1. PH 4: NA
NAME OF FILER (LAST)	(FIRST)	(2) 解: A - 1	(MIDDLE)
Ghosh	Suman		Marine Pari
1. Office, Agency, or Court		1-1	
Agency Name (Do not use acronyms)			
Department of Conservation			
Division, Board, Department, District, if appli-	cable	Your Position	
Division of Oil, Gas, and Geother	mal Resources	Associate Oil and Gas Engi	ineer
► If filing for multiple positions, list below or	r on an attachment. (Do not use ad	cronyms)	•
Agency:		Position:	
2. Jurisdiction of Office (Check at le	ast one box)		
State		☐ Judge or Court Commissioner (Sta	tewide Jurisdiction)
Multi-County		County of	
City of		Other	
3. Type of Statement (Check at least	one box)		
Annual: The period covered is January December 31, 2017.	y 1, 2017, through	Leaving Office: Date Left(Check one)	J
The period covered is December 31, 2017.	through	The period covered is January leaving officeor-	, 1, 2017, through the date of
Assuming Office: Date assumed		O The period covered is/ the date of leaving office.	, through
Candidate: Date of Election	and office sought, if o	different than Part 1:	Section (section)
4. Schedule Summary (must com Schedules attached	plete) ► Total number of	pages including this cover pag	30: married and a second and a
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Schedule A-1 - Investments – sched		chedule C - Income, Loans, & Business	
☐ Schedule A-2 - Investments – sched☐ Schedule B - Real Property – sched		chedule D - Income – Gifts – schedule : chedule E - Income – Gifts – Travel Pay	
Of	unie attached	Chedule E = Income - Gills - Travel Pay	Vinents - schedule attached
None - No reportable interests ■ No	on any schedule		
5. Verification			
MAILING ADDRESS STREET (Business or Agency Address Recommended - Public D	CITY ocument)	STATE	ZIP CODE
5816 Corporate Ave., Suite 100	Cypress	. CA	90630
DAYTIME TELEPHONE NUMBER		MAIL ADDRESS	
(714) 816-6847	sı	uman.ghosh@conservation.ca.	gov
I have used all reasonable diligence in prepa herein and in any attached schedules is true			owledge the information contained
I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.			
Date Signed 02/28/2018 (month, day, year)	Sign	ature	ent with your filing official.)
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